



TECHNICAL BRIEF

Improved Maternal Health through Traditional Birth Attendants

Background

In conjunction with Iraq's Ministry of Health (MoH), USAID's Primary Health Care Project in Iraq (PHCPI) strives to help Iraq meet its Millennium Development Goals (MDGs) 4 & 5, improving maternal health and decreasing child mortality. PHCPI will contribute to a quantifiable reduction in maternal, neonatal, infant and child mortality through targeted best practice interventions that improve the quality of services, improve utilization, and empower patients and the community. Because of the continuing significant role of traditional birth attendants (TBAs) in supporting mothers and newborns, especially among the disadvantaged, they will receive focused training and support to facilitate their improved promotion of antenatal care, referral of high risk mothers, provision of safe deliveries and promotion of newborn care at PHC clinics.

A traditional birth attendant (TBA) is "a person who assists the mother during childbirth and who initially acquired her skills by delivering babies herself or by working with other TBAs." In addition to attending deliveries, TBAs help with initiating breastfeeding, providing health education on reproductive health and nutrition, visiting mothers during and shortly following delivery to check for and educate them on the associated danger signs, and accompanying referrals to the health facilities for complicated deliveries.

Throughout history, traditional birth attendants have been one of the main health care providers for women during childbirth in Iraq. According to a survey conducted by the Iraqi Ministry of Health (MoH) in 2011 among 2,210 practicing TBAs, they attend to about 8% of total deliveries, 79% in rural areas and 21% in urban centers linked to health facilities. The bottleneck assessment, conducted in 2013 by USAID/PHCPI jointly with MoH, revealed that 29% of deliveries occur at home. This further emphasizes the importance of improving the skills of TBAs to ensure proper maternal health services are provided to women, especially in hard to reach areas.

Traditional Birth Attendants Key for Achieving MDGs 4 & 5

Highly respected in Iraqi communities, TBAs provide essential social support to women during childbirth and maintain trust among the women they assist. Without modern training on how to attend to pregnant women, TBAs are unable to recognize and respond appropriately to pregnancy complications. For this reason, deliveries attended by untrained TBAs are risky for women and their babies, leading to poor health outcomes and

Figure 1. Delivery Attendance by Cadre
2012 - Iraq

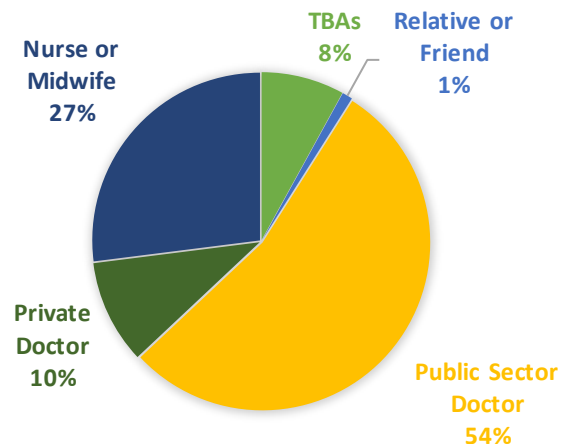
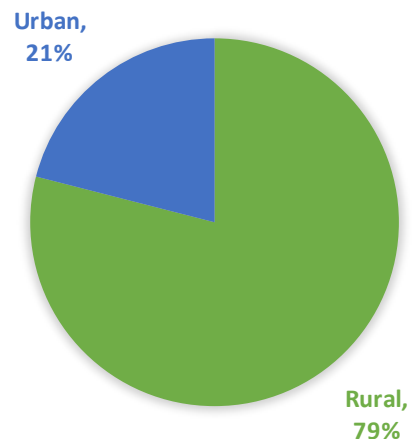


Figure 2. Distribution of TBAs in Iraq



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even death.

In response to this, PHCPI has assisted the MoH in the development of a TBA strategy through a cascade of training courses as well as updating and developing guides for Private Unlicensed Midwife Trainers, Work Contexts of Community Midwives, a TBA Colored Guide and other IEC materials.

TBA trainings focus on the catchment areas of the 298 primary health care centers (PHCCs) targeted by PHCPI. Initially, the project trained TBA trainers-of-trainers (TOTs) to be the nucleus for further training of TBA trainers at the PHCC level. TBAs linked to these clinics are being trained and, following training, being equipped with TBA kits. These kits are only issued to TBAs who have been properly trained and are competent to take care of the newborn and the mother. A database of TBAs will be developed in collaboration with the MoH and their performance monitored through an operations research project.

PHCPI Achievements

- ◆ An evidence based TBA training and implementation strategy has been developed through collaboration between the MoH and PHCPI.
- ◆ Developed a database of functional TBAs in the project catchment areas.
- ◆ Work Contexts of Community Midwives (TBA protocols) was developed to be the nucleus for the TBA training framework.
- ◆ Guide for Private Unlicensed Midwife Trainers (TBA curriculum) was developed which includes general guidelines that describe the process of training and background on training content, a general technique for training, referral, follow-up and evaluation of results. It also includes an identification of the basic training points, techniques or methods of teaching and learning as well as support materials for training and evaluation for each topic.
- ◆ 2000 Arabic TBA colored guides were developed, printed and distributed. These will be used by PHC trainers to train TBAs on 24 basic messages discussing safe delivery, danger signs, referral indicators, puerperal complications, breastfeeding, complementary nutrition, family planning and other important instructions.
- ◆ 2 TBA TOT training workshops were held in Baghdad and Erbil and 55 participants graduated as TBA TOTs.
- ◆ 43 rollouts of TBA trainings have been conducted.
- ◆ About 800 TBA trainers and TBAs affiliated with PHCC catchment areas were trained.
- ◆ PHCPI conducted TBA trainings in areas with a high percentage of IDPs and rural areas with a high rate of home deliveries, in catchment areas out of PHCPI-supported PHCCs.
- ◆ Two TOT refresher workshops were conducted in Maysan and Erbil for trainers covering PHCPI-supported PHCCs with delivery rooms to provide basic essential newborn care and referral indicators to TBAs as a component of their childbirth clinical care training.
- ◆ 500 TBA kits purchased and provided to TBAs, each kit contained 19 items, some of them imported from different countries, in order to supply TBAs with needed high quality materials.
- ◆ 17 TBA training kits were purchased from the local market and distributed to DOHs for training purposes by TOTs and PHC trainers.

